

Please type or print in ink.

## STATEMENT OF ECONOMIC INTERESTS

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## **COVER PAGE**

A PUBLIC DOCUMENT

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NAME OF FILER (LAST)	(FIRST)	2019 HAR (MODLE) AT 11 . 5 1
Wilson	John Michael	Manango
1. Office, Agency, or Court		
Agency Name (Do not use acronyms)		HAM TO FRAME OUT TO A STATE OF THE STATE OF
Natural Resources Agency, De	partment of Conservation	
Division, Board, Department, District, if ap	oplicable	Your Position
Division of Oil, Gas and Geothe	ermal Resources	Associate Oil & Gas Engineer
► If filing for multiple positions, list below	v or on an attachment. (Do not use ac	eronyms)
Agency:		Position:
2. Jurisdiction of Office (Check at	t least one box)	
State     State	,	☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County		County of
City of		
City of		Other
3. Type of Statement (Check at lea	st one box)	
Annual: The period covered is Janu December 31, 2018.	uary 1, 2018, through	Leaving Office: Date Left/(Check one circle.)
The period covered is December 31, 2018.	, through	<ul> <li>The period covered is January 1, 2018, through the date of -or-</li> </ul>
Assuming Office: Date assumed _	01 , 29 , 2019	The period covered is/, through the date of leaving office.
Candidate: Date of Election	and office sought, if d	ifferent than Part 1:
4. Schedule Summary (must co Schedules attached	mplete) ► Total number of	pages including this cover page:
Scriedules attached		
Schedule A-1 - Investments – sch		chedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments – sch		chedule D - Income – Gifts – schedule attached
Schedule B - Real Property – sch	iedule attached	chedule E - Income - Gifts - Travel Payments - schedule attached
-or- ☑ None - No reportable inte	rests on any schedule	
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public	CITY C Document)	STATE ZIP CODE
4800 Stockdale Hwy Ste 100	Bakersfield	CA 93309
DAYTIME TELEPHONE NUMBER		AIL ADDRESS
( 661 ) 864-6231	john.wilson@conservation.ca.gov	
have used all reasonable diligence in pre herein and in any attached schedules is to	paring this statement. I have reviewed rue and complete. I acknowledge this	this statement and to the best of my knowledge the information contained is a public document.
I certify under penalty of perjury under	the laws of the State of California the	hat the foregoing is true and correct.
Date Signed 03/21/2019	01	
(month, day, year)	Signa	(File the originally signed paper statement with your filing official.)